

L030000019257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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06 MAR 14 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Arlene F. Austin, P.A.

ATTORNEY AT LAW

5811 Pelican Bay Boulevard
Suite 201
Naples, Florida 34108

(239) 514-8211
Fax (239) 514-4618
afaustin@att.net

March 3, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Skylight Solutions & More, LLC
Documents #L03000019257
Our File No. 9940.0

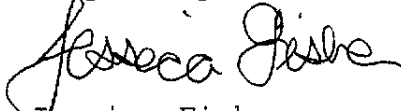
Gentlemen:

Enclosed please find the following documents:

1. Resignation of Member, Managing Member or Manager for:
 - a. Randolph I. Cortada
 - b. Marcia Cortada
2. 2006 Limited Liability Company Annual Report
3. Our check in the amount of \$100.00, for the filing fees.

If you have any questions, please do not hesitate to contact me. Thank you for your assistance in this matter.

Very truly yours,


Jessica Fisher
Paralegal

JF:afa
Encs.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Skylight Solutions & More, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Arlene F. Austin

(Name of Person)

Arlene F. Austin, P.A.

(Firm/Company)

5811 Pelican Bay Blvd., Suite 201

(Address)

Naples, FL 34108

(City/State and Zip Code)

For further information concerning this matter, please call:

Arlene F. Austin

(Name of Person)

at (239) 514-8211

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Randolf I. Cortada, hereby resign as Member/Manager
(Title)

of Skylight Solutions & more, LLC
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida

and affirm that the limited liability company has been notified in writing of the resignation.

A handwritten signature in cursive script, reading "Randolf I. Cortada", is written over a horizontal line.

(Signature of resigning manager, managing member or member)
Randolf I. Cortada

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E079 (8/05)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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